



Indiana Housing & Community Development Authority

2021 COVID-19 Impact Grant Final Report

September 2022



Executive Summary

COVID-19 Impact Grants

In January 2021, IHCDCA announced the availability of COVID-19 Impact Grants to allow eligible organizations to “support a single project with a goal to affect change at the Individual/Family or Community Level.”

Funding for the grants came from CARES dollars allocated to IHCDCA in 2021. As such, organizations applying for COVID-19 Impact Grants were asked to serve individuals and/or families that had been impacted by COVID-19.

A total of six organizations received COVID-19 Impact Grants from IHCDCA in 2021. Grant funds were used by these organizations to support programming (either general operating costs or designated project-related expenses) delivered between September 2021 and August 2022.

Organizations that received a COVID-19 Impact Grant from IHCDCA were required to select a single outcome from the Individual and Family National Performance Indicators (FNPIs) or Community National Performance Indicators (CNPIs) included in the Community Services Block Grant (CSBG) Annual Report.

COVID-19 Impact Grant recipients also agreed to work with an evaluator selected by IHCDCA who would provide technical support related to outcome measurement and collect, analyze, and report data on program implementation and outcomes during the funding period.

A total of six organizations received COVID-19 Impact Grants from IHCDCA in 2021. Programming delivered and outcomes observed by three of those organizations are included in the present report.

Measuring Impact...

COVID-19 Impact Grant recipients agreed to work with an evaluator selected by IHCDCA to provide technical support related to outcome measurement. The evaluator would help support the collection of data and analyze data on program implementation and outcomes during the year-long funding period. Program outcomes measured by each of the three grantees included in this report are:



Fathers and Families Center: COVID-19 impacted unemployed adults will obtain and maintain living-wage employment for at least 180 days.



NeighborLink Indianapolis: COVID-19 impacted individuals/families who enter and remain in safe and affordable housing for 180 days or more.



YWCA Northeast Indiana: COVID-19 impacted individuals/family who enter or maintain mental health services, and report improved mental health as a result of those services.

Evaluation Approach

Each of the three COVID-19 Impact grantees included in this report worked with Limelight Analytics, an evaluation and measurement firm based in Bloomington, Indiana, during the term of the grant period to support their grant-specific evaluation efforts. The collaboration was facilitated through monthly video conference meetings during which time they documented key elements of program implementation, developed a logic model, and designed and executed an outcome measurement plan. Data collection responsibilities were managed by the COVID-19 Impact grantees, and Limelight Analytics conducted all data analyses and developed organization-specific reports as well as the present aggregate-level report. This report describes key elements of programming offered by each grant-funded organization from September 2021 through July 2022, a description of their COVID-19 Impact Grant outcome measurement plan, and the results of the analyses performed on the data collected during the grant period.

Executive Summary



Fathers and Families Center

Fathers and Families Center is dedicated to supporting Indianapolis fathers in their efforts to become better partners, parents, and providers. The *Strong Fathers* class is the signature program of Fathers and Families Center and serves as the “front door” for the organization. The three-week class is designed to show fathers or expectant fathers how to be outstanding role models for their children, provide for their families, and learn critical job-readiness skills. Participants can earn a weekly stipend for participating and are eligible to receive help with transportation. Class topics include parenting, healthy relationships, healthcare, financial management, career exploration, and job readiness. Fathers and Families Center leveraged their COVID-19 Impact Grant funds to support their workforce development efforts, which will help fathers increase their earnings and advance their careers.

COVID-19 Impact Grant - Family Level Outcome

COVID-19 impacted unemployed adults will obtain and maintain living-wage employment for at least 180 days.

Anticipated Number of Program Participants: 40

COVID-19 Impact Grant Participants (n=66)

- Sixty-six participants completed at least one week of the Strong Fathers class and met the Federal Poverty Level requirements as outlined by the grant (<125%).
- All participants were males and nearly all were African American and non-Hispanic.
- The average age of participants was 34. Most participants were parents and had children under the age of 18.
- Nearly all participants were unemployed at intake. Many participants had been laid off or were unable to work during the past year due to safety concerns and/or family responsibilities.

Outcome Data

Outcome data were collected through follow-up phone calls in combination with employment verification using paystubs. Employment placement data were available for 15 participants and retention data were available for 5 participants.

# Placed in Employment		Full-Time Employment	
15 participants		93%	
30-day Retention	60-day Retention	90-day Retention	Average Wage at Retention
2 participants	2 participants	1 participant	\$19/hour



Executive Summary



NeighborLink Indianapolis

NeighborLink offers free home repairs and services such as plumbing, heating, electrical safety, ceiling and wall repair, yard work, major clean-up services, and accessibility related repairs and modifications. Many of the projects requested are needed to ensure that that homes continue to be habitable, and priority support is provided for those repairs that address citations given by the Marion County Public Health Department.

NeighborLink's COVID Recovery Initiative (CRI) was developed to address the impact of COVID-19 on low-income seniors and homeowners with disabilities in Indianapolis. By the summer of 2021, NeighborLink had a backlog of 125 projects that had not been addressed due to COVID-19 safety precautions. Because COVID-19 vaccinations were accessible and available to older adults by the summer 2021, NeighborLink staff felt that, with appropriate safety protocols in place, it could be safe to resume indoor home repairs for their senior clientele.



COVID-19 Impact Grant - Family Level Outcome

COVID-19 impacted individuals/families who enter and remain in safe and affordable housing for 180 days or more.

Anticipated Number of Participants Served: 66

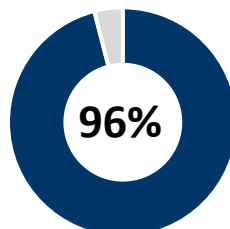
COVID-19 Impact Grant Participants (n=108)

- NeighborLink served 108 homeowners with support from IHEDA COVID-19 Impact Grant.
- 108 Marion County homeowners met the requirements to receive free home repairs (< 150% FPL and home ownership).
- Most homeowners were female and African American, and over half were also disabled.
- The average age of homeowners was 69.
- Eighty-one residents had one project completed, and 29 had two or more projects completed.

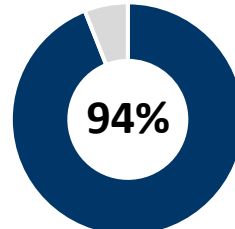
Outcome Data

Data were collected through follow-up phone calls conducted by staff and practicum students. Due to the limited ability of staff to conduct follow-up phone calls at regular intervals, follow-up occurred, on average, 179 days after project completion. When homeowners were not available via phone, staff verified residency by reviewing public records to determine if the property had transferred owners or if the homeowner was deceased.

Living in Home at Follow-Up (n=108)



Reported Home is Safe at Follow-Up (n=49)



Time Between Project Completion and Follow-Up

Range:
101-287 days

Average:
179 days

Executive Summary



Hope & Harriet Addiction Recovery Program

The Hope & Harriet program is an intensive, residential treatment program in a sub-acute medical facility tailored to treat adult women living with substance use disorder. Residents receive a high level of support and structured wrap-around services to meet their individual needs. Hope & Harriet is a contracted service provider with the Indiana Department of Child Services and is an approved Recovery Works provider.

Although the most drastic COVID-19 safety precautions were implemented in 2020, COVID-19 was still impacting Hope & Harriet residents before their arrival to the program in 2021, and it continued to limit opportunities for recovery support while residents were in treatment. Hope & Harriet staff reported that residents who joined the treatment program in 2021 and 2022 had often experienced greater levels of depression and substance use as a result of isolation, financial stress, and lack of employment opportunities associated with COVID-19.



COVID-19 Impact Grant - Family Level Outcome

COVID-19 impacted individuals/family who enter or maintain mental health services, and report improved mental health as a result of those services.

Anticipated Number of Participants Served: 120

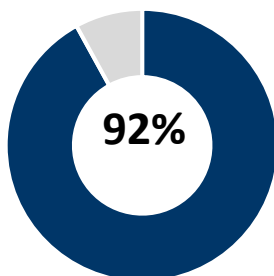
COVID-19 Impact Grant Participants (n=85)

- A total of 85 participants were served during the grant period. However, 32 participants received treatment for less than 60 days, which was the threshold determined by YWCA NEIN for successful program completion. For this reason, the analysis of outcome data only included 53 participants who remained in treatment for at least 60 days.
- All participants served during the grant term were referred either by criminal justice entities (49%) or the Department of Child Services (51%).
- All clients were female, 87% were white, and the average age was 31; 76% percent of clients reported that they had children under the age of 18 and 19% had children living with them while they resided at Hope & Harriet.

Drug Screening Results

Drug screens occur at intake and every 30 days when clients are residing at Hope & Harriet. Residents are also screened upon discharge from the program.

Clean Drug Screen at 60 Days (n=51)



Mental Health Screening Results

YWCA staff use several mental health screening tools as they treat clients. These tools have been historically used to screen clients for mental health issues at intake. These tools were also used to assess indicators of mental health at follow-up for this project.

Wellbeing Survey (n=17)

88% showed increased hopefulness or continued to report high levels

General Anxiety Disorder (GAD) – 7 (n=11)

64% showed improvements in anxiety

Patient Health Questionnaire (PHQ) – 9 (n=11)

55% showed improvements in depressive symptoms

Executive Summary

Conclusions

Outcome data collected by the three organizations that received evaluation support from Limelight Analytics suggest that they are beginning to benefit the COVID-impacted individuals and families they served during the grant period. However, none of the organizations were successfully able to collect 180-day follow-up data from the majority of of the clients/participants they served during the grant.

Despite these challenges, all three organizations have developed a greater understanding of the the resources, protocols and time that is needed to collect robust outcome data. Should these organizations sustain their current data collection systems and devote staff time and energy to gathering these data, they all should be able to draw more significant conclusions about the impact of their services and support over a six-month timeframe.

Recommendations

After reflecting on the 10 months of collaborative work with the three grantee organizations, and analyzing the data these organizations were able to collect, Limelight Analytics offers the following recommendations to IHCD should they choose a similar evaluation approach in the future:

- There was minimal focus on evaluation sustainability as a grant requirement. Although organizations received technical support on data collection and outcome measurement, there was no emphasis on putting an evaluation structure in place to continue efforts beyond the grant period. While there is likely some sustainable increases in evaluation capacity, it's unclear how permanent these capacity increases are. For this reason, it may prove useful in the future to consider ways to encourage sustained capacity building with future outcome-focused funding streams.
- If IHCD uses prescribed outcome measures for future grant competitions, it may be useful to define shorter follow-up periods (e.g., 60 or 90 days). Because several of the outcome options included in the grant application involved longer-term outcomes, of which the follow-up period spanned half of the grant term (6 months), there were not likely sufficient opportunities to collect and present complete data.
- Even with sustained increases in evaluation capacity, it is unlikely that sophisticated data analysis capacity exists within any of these three organizations. Because data analysis for this project often required the merging of files from different sources, filtering of data, and summarizing services and multiple data points per client, it will likely prove useful to continue to provide external evaluation expertise for outcome measurement for defined groups of program participants.

Introduction

The mission of the Indiana Housing and Community Development Authority (IHCDA) is, “To provide housing opportunities, promote self-sufficiency, and strengthen communities.” Their work is facilitated through partnership with developers, lenders, investors, and nonprofit organizations that leverage IHCDA resources to support low and moderate-income Hoosiers. In January 2021, IHCDA announced the availability of COVID-19 Impact Grants to provide funding from April 2021 through September 2022 and allow eligible organizations to “support a single project with a goal to affect change at the Individual/Family or Community Level.” Funding for these grants came from CARES dollars allocated to IHCDA. As such, applying organizations were asked to serve individuals and/or families that had been impacted by COVID-19.

A total of six organizations received COVID-19 Impact Grants from IHCDA in 2021. Programming delivered and outcomes achieved by three of those organizations are included in the present report. A second report, compiled by Indiana University Public Policy Institute, describes the programming and outcomes achieved by the additional three organizations. The three COVID-19 Impact Grant recipients included in this report (Fathers and Families Center, NeighborLink Indianapolis, and YWCA Northeast Indiana) each received \$100,000 in funding from IHCDA to support workforce development, home ownership, and substance abuse recovery, respectively. A short description of each grant recipients is included below.

Fathers and Families Center

Fathers and Families Center is dedicated to supporting Indianapolis fathers in their efforts to become better partners, parents, and providers. The *Strong Fathers* class is the signature program of Fathers and Families Center and serves as the “front door” for the organization. The three-week class is designed to show fathers or expectant fathers how to be outstanding role models for their children, provide for their families, and learn critical job-readiness skills. Participants can earn a weekly stipend for participating and are eligible to receive help with transportation. Class topics include parenting, healthy relationships, healthcare, financial management, career exploration, and job readiness. Fathers and Families Center utilized their COVID-19 Impact Grant to increase the effectiveness of their workforce development efforts, which are intended to help families increase their earnings and advance their careers.

NeighborLink Indianapolis

This mission of NeighborLink Indianapolis is to offer “an improved quality of life to very low-income senior homeowners and homeowners with disabilities in Indianapolis (Marion County), Indiana by providing free home repair services.” In doing so, they hope to enable these homeowners to age in place with dignity. NeighborLink is volunteer-driven and community-supported through churches, schools, businesses and individuals. Because homeowners supported by NeighborLink were a particularly vulnerable population during the pandemic, the organization had discontinued all indoor projects in spring 2020. In addition, NeighborLink’s backlog also included a number of outdoor projects due to the limited availability of volunteers, many of whom were also older adults. By summer 2021, with appropriate safety protocols in place, NeighborLink resumed indoor home repairs for their senior clientele. Due to the size of the overall backlog, they supplemented their traditional volunteer-based

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model with a contractor-based model that leveraged the funds from the IHCD COVID-19 Impact Grant for contractors to address many of the more serious home repair projects on the backlog.

YWCA Northeast Indiana – Hope & Harriet Addiction Recovery Program

Hope & Harriet is an intensive, residential treatment program in a sub-acute medical facility tailored to treat adult women living with substance use disorder. Residents receive a high level of support and structured wrap-around services to meet their individual needs. Hope & Harriet is a contracted service provider with the Indiana Department of Child Services and is an approved Recovery Works provider. Hope & Harriet residents work through a tiered recovery program with the goal of achieving self-sufficiency and reunifying with their children, family, and friends.

COVID-19 Impact Grant Evaluation Approach

Organizations that received a COVID-19 Impact Grant from IHCD were required to select a single outcome from the Individual and Family National Performance Indicators (FNPIs) or Community National Performance Indicators (CNPIs) included in the Community Services Block Grant (CSBG) Annual Report. Grant recipients also agreed to work with an evaluator selected by IHCD that would provide technical support related to outcome measurement and collect, analyze, and report data on program implementation and outcomes during the year-long funding period. The outcomes selected by each of the three organizations included in this report are:

- **Fathers and Families Center:** COVID-19 impacted unemployed adults will obtain and maintain living-wage employment for at least 180 days.
- **NeighborLink Indianapolis:** COVID-19 impacted individuals/families who enter and remain in safe and affordable housing for 180 days or more.
- **YWCA Northeast Indiana:** COVID-19 impacted individuals/family who enter or maintain mental health services, and report improved mental health as a result of those services.

All three organizations worked with Limelight Analytics during the term of the grant period to support their grant-focused evaluation efforts. The collaboration was facilitated through monthly online meetings during which they documented key elements of program implementation, developed a logic model, and designed and executed an outcome measurement plan. Data collection responsibilities were managed by the organizations, and Limelight Analytics conducted all data analyses and developed organization-specific reports as well as this aggregate-level report. The present report includes key features of programming offered by each grant-funded organization from September 2021 through July 2022, their COVID-19 Impact Grant Outcome Measurement Plan, and the results of analyses performed on the data collected during the grant period. Near the end of the project term, Limelight Analytics gathered feedback from the organizations on the benefits and opportunities presented by the COVID-19 Impact Grant. Those results are presented at the end of the report, along with recommendations for IHCD.



Fathers & Families Center

- Project Implementation
- Outcome Measurement Plan
- Data Analysis Results
- Organization Recommendations



COVID-19 Recovery Initiative

Fathers and Families Center is dedicated to supporting Indianapolis fathers in their efforts to become better partners, parents, and providers. The *Strong Fathers* class is the signature program of Fathers and Families Center and serves as the “front door” for the organization. The three-week class is designed to show fathers or expectant fathers how to be outstanding role models for their children, provide for their families, and learn critical job-readiness skills. Participants can earn a weekly stipend for participating and are eligible to receive help with transportation. Class topics include parenting, healthy relationships, healthcare, financial management, career exploration, and job readiness.

Men who are enrolled in or who have completed the the Strong Fathers class are also eligible to receive employment training and career services offered by the organization. These services are guided by the “ABC employment approach” (A job, Better job, Career). Men receive job readiness assistance, job placement support, post-employment assistance, and career/training certifications. Special emphasis is placed on getting participants prepared for high-demand jobs in the greater Indianapolis area. For example, in 2021 and 2022, there has been an increasing demand for commercial truck drivers, both for local and intrastate commerce. The Fathers and Families staff have developed partnerships with local agencies that provide CDL (commercial drivers license) training, and they work with program participants to ensure they able to meet all precedents to training and are likely to complete the training once they begin.

In addition to the Strong Fathers class and employment, training, and career services, FFC also offers *Strengthening Families* programming, which includes *Women’s Empowerment* workshops and couple’s sessions. The *Women’s Empowerment* sessions affirm the strength, experiences, creativity, and intelligence of women. Couples also have an opportunity to work with staff to set goals and strengthen their relationships through additional programming. FFC also provides family programming such as *2Gen Education* sessions and Family Nights as well as access to services for children and families through their referral partners.

FFC is utilizing COVID-19 Impact Grant funds from IHCD to increase the effectiveness of their workforce development efforts, which will, in turn, help families increase their earnings and advance their careers.

After offering virtual programming since March 2020, FFC reopened their doors in August 2021 to in-person classes, case management, and other support services. Participation numbers have been lower than normal since reopening, and recruitment has proven to be more challenging than expected. Overall, FFC is seeing a 50% reduction in participation. In addition, attrition has proven to be more of a challenge than it had been previously. Program staff have been more forgiving about course attendance, despite knowing that this may reduce the overall benefits of the program for participants.

The current labor market is also likely contributing to the challenges of recruiting new participants. A relatively low unemployment rate, combined with a high rate of job turnover in many sectors means that jobs are currently easier to find. In addition, many jobs are offering higher wages than were offered pre-pandemic.



COVID-19 Recovery Initiative

During the term of the COVID-19 Impact Grant, FFC has focused their marketing and recruitment strategies on their biggest asset, the *combination* of services they offer. Program participants can receive employment support services and the opportunity to increase their level of education. In addition, staff are trained to provide support to overcome the multiple barriers participants often face to financial and emotional success.

Presented below is a summary of challenges to program implementation faced by FFC from September 2021 to August 2022, when the program received financial support from the Indiana Housing and Community Development Authority (IHDCA). Also included are the efforts made by FFC to help overcome these challenges and provide workforce development support to young fathers (and fathers-to-be) in Indianapolis.

Implementation Challenges Encountered	Strategies to Address Challenges
Attendance in the “Strong Fathers” class has been considerably lower than pre-pandemic levels. Program staff continue to run the three-week course once a month, but overall participation numbers are down.	Radio and bus-tail ads have been replaced by Facebook advertisements. In addition, program staff actively sought peer referrals from program participants, as this has been a strong source of recruitment in the past.
Throughout 2021 and early in 2022, FFC experienced a fair amount of staff turnover, some of which was likely related to the retirement of the founder and President/CEO. During the grant term, FFC was understaffed by as many as three full-time positions.	FFC has worked hard to redistribute staff and ensure that program participants develop meaningful relationships with multiple staff members during their involvement. The smaller class sizes have been somewhat advantageous in that they allow participants to connect with staff and learn more about the services and support offered. This is not to say that staff shortages haven’t had an impact. There have been inconsistencies in direct services and follow-up contacts for updates and data collection.
From fall 2021 to summer 2022, the labor market continued to experience a shift. Overall, wages increased and opportunities for employment were abundant, particularly compared to the prior year. As such, there was an increased demand for job training and certifications rather than employment support.	Because program participants have been increasingly interested in certifications and job-specific training, this has provided an opportunity for FFC to strengthen their relationship with workforce training partners that offer this training. Although this sometimes results in delayed employment for participants who choose to focus on this training, jobs requiring CDL’s and other in-demand professional certifications usually pay higher wages, which are consistent with the goals of the Impact Grant programming provided by FFC.

Outcome Measurement Plan

The Outcome Measurement Plan for Fathers and Families outlines the data collection strategies and timeline associated with assessing the outcomes of program services supported by the IHCD COVID-19 Impact Grant.

COVID-19 Impact Grant - Family Level Outcome

COVID-19 impacted unemployed adults will obtain and maintain living-wage employment for at least 180 days.

Anticipated Number of Program Participants: 40

1. Participant Inclusion: participants meeting the following criteria will be included in outcome data analysis.

Criteria/Indicator	Data Collection & Management	Notes	Contact
COVID-19 Impacted	Intake Interview ETO Database Family Progress Survey	Track how employment status was affected by COVID (e.g., laid off; stopped seeking employment)	Landon
Unemployed	Intake Interview ETO Database	Employment status is recorded at intake: Full-Time, Part-Time, Unemployment, Not in Workforce.	Landon
Income Level	Intake Interview ETO Database	Percent of FPL is calculated at intake (must be less than 125% FPL)	Landon

2. Outcome Indicators that represent: "Obtain and Maintain Living-Wage Employment"

Indicator	Data Collection & Management	Notes	Contact
Length of Employment	Follow-Up Calls ETO Database	Every 30 days, current employer and number of hours worked per week is collected via phone call; verified w/pay stubs.	Landon
Living-Wage	Follow-Up Calls ETO Database	Every 30 days, current pay rate is collected via phone call; verified with pay stubs. Use Employ Indy (Good Wages Initiative) for living wage benchmarks.	Landon
Change in Employment	Follow-Up Calls ETO Database	Every 30 days, employment status (retention, job change and new wage, or quit/fired) assessed with via phone call; verified with pay stubs.	Landon

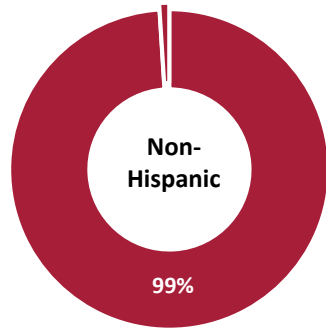
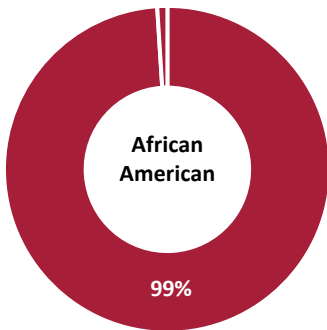
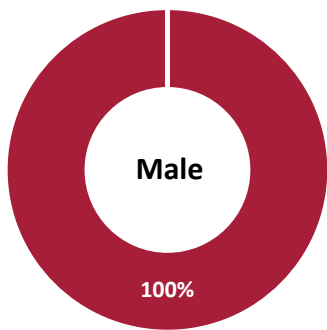


Results: Participant Characteristics

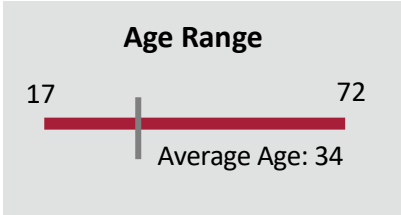
Participant Characteristics (n=66)

Data were analyzed for 66 participants who completed at least one week of the Strong Fathers class and met the Federal Poverty Level requirements as outlined by the grant (<125%). There were an additional 25 participants who were involved with the program during the grant period, however these participants did not fall under the Federal Poverty Level requirement.

All participants were males and nearly all were African American and non-Hispanic. The average age of participants was 34. Most participants were parents and had children under the age of 18. Although there were limited opportunities to measure the extent to which participants were affected by COVID-19, nearly all participants were unemployed at intake. Many participants had been laid off or were unable to work during the past year due to safety concerns and/or family responsibilities.

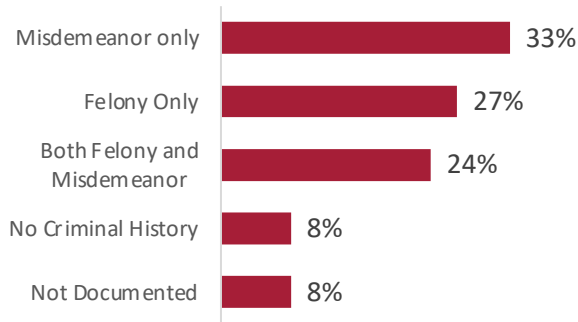


Percent Self-Identified as a Parent	Percent with Children	Percent with Children under 18
89%	91%	85%



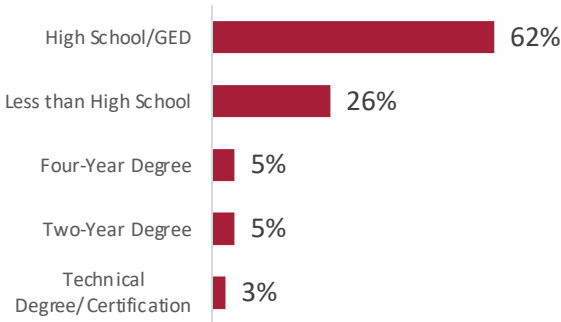
Justice System History

84% of participants had current or past involvement with the justice system.



Highest Level of Education Completed

Over 60% of participants had completed high school or earned a GED.



Outcomes

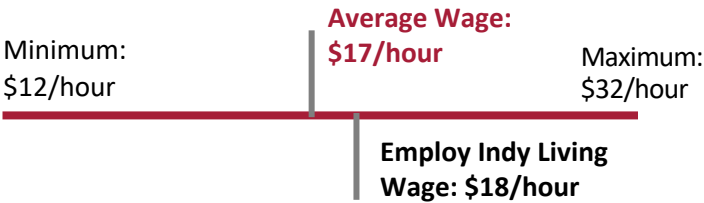
Most outcome data were collected through follow-up phone calls in combination with employment verification using paystubs. FFC exceeded their goal of serving 40 participants. However, employment placement data were available for only 15 participants and retention data were available for 5 participants. In order to assess the extent to which participants earned a living-wage, the Employ Indy Living Wage standard was used as a comparative standard. Employ Indy considers \$18/hour, full time employment, and health insurance offered as a “living wage”.

Employment Placement Results

Of the 66 participants who completed the Strong Fathers class, 15 secured employment in a variety of jobs, including forklift operator, material handler, dishwasher, cleaning, construction, and warehouse. Most of the jobs were considered B/C jobs (above entry level and/or long-term employment) and offered full-time hours. Just half of the jobs eventually will provide health insurance. The average wage was \$17/hour, and on average, participants were placed in employment 33 days after completing the class.

Placed in Employment	Full-Time Employment	Health Insurance Offered	Job Type
15 participants	93%	54% will eventually be offered health insurance	93% were B/C level jobs

Starting Wages



Length of time Between Class Completion and Placement

- The maximum length between class completion and job placement was 217 days.
- Two participants were employed while attending the class.
- On average, participants were placed with employment within 33 days of class completion.

Employment Retention Results

Employment retention data were available for 5 participants, two of which had retained employment for 30 days, Another two retained employment for 60 days, and one retained employment for 90 days. All jobs were full time, and the average wage at follow-up was \$19/hour, just above the Employ Indy Living Wage of \$18/hour.

Retained for 30 days	Retained for 60 days	Retained for 90 days	Average Wage at Retention	Common Job Titles
2 participants	2 participants	1 participant	\$19/hour	Forklift Operator, Material Handler, Cook, Shift Supervisor, Welder

Data Limitations & Additional Outcomes

Limitations

Of the 66 participants who completed the Strong Fathers class, employment placement data were available for 15 participants. During the grant term, FFC was understaffed and therefore was limited in their ability to verify employment status of participants. As such, it is unknown whether participants without verified placement data were employed or unemployed. Additionally, participants tend to engage intermittently with the organization, which limits staff’s ability to track employment over time.

Additional Outcome Results

During the COVID-19 Impact Grant term, FFC participants were offered opportunities for training that are known to lead to employment in long-term, high-wage jobs. Participants could participate in high school equivalency preparation, earn Job Ready In Badges by participating in job-readiness training, and attend vocational training to become certified in a particular field. Participants set employment-related goals at intake and are encouraged to take steps to achieve these goals throughout their involvement with the organization. Outcomes related to these additional training opportunities are described below.



Conclusions & Recommendations

Despite program implementation challenges related to low enrollment numbers and staff turnover, FFC provided workforce development support for 55 men from September 2021 through July 2022. Presently, there are limited data available to assess the extent to which program participants gained and maintained employment at a living wage 180 days later. The data that are available (for 15 participants) are encouraging: 93% were employed full-time and their average wage was \$17 per hour, just below the threshold of \$18 per hour. Most of the follow-up data was collected much earlier than 180 days after enrollment, and it is not clear whether the 40 participants with missing data were employed or unemployed following their participation. As FFC moves ahead, the following recommendations are offered in support of program implementation and program evaluation:

Program Implementation

1. Participant-Program Alignment:

Although the demographic characteristics of program participants served during the COVID-19 Impact Grant are consistent with those served prior to COVID-19, program staff should more closely examine the goals and aspirations of the men that are now participating in the program. Is there still alignment between the needs of the participants and the services provided, especially given the shift in the labor market since 2020? There may be an opportunity to tailor their program model (and expected outcomes) to the men who are most likely to participate and benefit from FFC.

2. Ensure the Current Program Model Includes Opportunities to Develop Strong Relationships:

Near the end of the COVID-19 Impact Grant term, FFC staff realized that one of the barriers to collecting the follow-up employment verification needed to measure their outcome was that there was little response to the requests for follow-up made by the staff. Although staff shortages certainly made it challenging to develop strong relationships between staff and participants, it's likely that the intermittent engagement by participants also poses a challenge. FFC staff are encouraged to review their current program model and identify strategies that facilitate the development of staff-participant relationships. This is likely to support the attainment of employment outcomes as well as the measurement of them.

Program Evaluation

1. Review Staffing Plan for Collecting Follow-up Employment Data:

When FFC experienced staff shortages over the past year, there was an extended period of time during which follow-up calls were not made to program participants to confirm employment and wages. Because it appears that the responsibility for this task fell to one person, FFC should consider decentralizing responsibility for this task. If follow-up data collection responsibilities can be shared by multiple staff members, this may support more effective ongoing data collection efforts.

2. Explore Alternative Employment Verification Strategies:

FFC currently verifies employment and wages of program participants by viewing their pay-stub. Program participants are asked to come to the center and bring a copy of their pay-stub. Because this requires transportation and a hard-copy of a pay-stub, response rates tend to be low. Program staff are encouraged to explore innovative technology apps that could allow program participants to share this information more easily. Given that many companies pay employees through direct deposit and provide electronic copies of a pay-stub, there are likely to be strategies that can streamline this process. These efficiencies could result in more efficient and comprehensive employment verification in the future.





- Project Implementation
- Outcome Measurement Plan
- Data Analysis Results
- Organization Recommendations

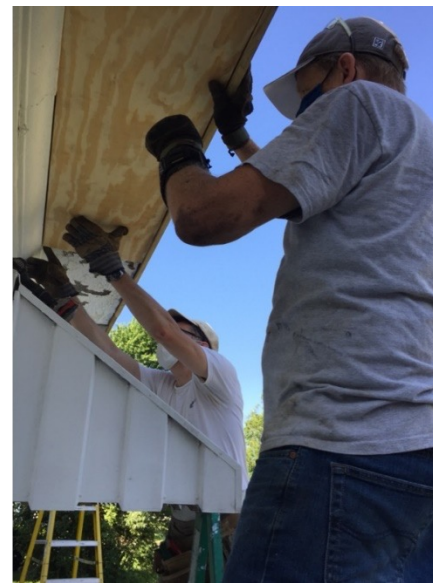


Program Description

NeighborLink Indianapolis was founded in 2013 by a group of retired individuals who saw an unmet community need to help older homeowners address serious home-related issues. NeighborLink's mission is to offer "an improved quality of life to very low-income senior homeowners and homeowners with disabilities in Indianapolis (Marion County), Indiana by providing free home repair services." In doing so, they hope to enable these homeowners to age in place with dignity. NeighborLink is volunteer-driven and community-supported through churches, schools, businesses and individuals. This program model allows them to support many home-repair projects with limited financial resources. In 2021, NeighborLink had a volunteer pool of more than 400 people to complete their projects. In 2022, they are on-track to increase the size of their volunteer pool, which includes approximately 50 organized groups through companies, schools, and community-based organizations, and individuals with an array of home-repair experience (some of whom begin their volunteer experience with no home-repair skills at all).

NeighborLink offers free home repair and services such as plumbing, heating, electrical safety, ceiling and wall repair, yard work, major clean-up services, and accessibility related repairs and modifications. Many of the projects requested are needed to ensure that that homes continue to be habitable, and priority support is provided for those repairs that address citations given by the Marion County Public Health Department.

In order to qualify for support from NeighborLink, homeowners must reside inside Marion County, be age 62 or older (or have a disability) and have household income that does not exceed 150% of the federal poverty level. Requested repairs are only accepted for homes in which the applicant lives as their primary residence.



COVID-19 Recovery Initiative

NeighborLink's COVID Recovery Initiative (CRI) was developed to address the impact of COVID-19 to low-income seniors and homeowners with disabilities in Indianapolis. By the summer of 2021, NeighborLink had a backlog of 125 projects that had not been addressed due to COVID-19 safety precautions. Because COVID-19 vaccinations were accessible and available to older adults by the summer 2021, NeighborLink staff felt that, with appropriate safety protocols in place, it could be safe to resume indoor home repairs for their senior clientele.

Due to the size of the overall backlog, NeighborLink realized that their typical volunteer-based model would not be sufficient to address the needed repairs with any kind of efficiency. Instead, they proposed a supplemental program model that included engagement of paid contractors to address many of the more serious home repair projects on the backlog. On average, contractor-performed projects are typically twice as expensive as those performed by volunteers. However, with the support of an Impact Grant from the Indiana Housing and Community Development Authority, NeighborLink estimated that it could pay for contractors for 66 additional projects from September 2021 through August 2022.



COVID-19 Recovery Initiative

Upon receipt of the Impact Grant from IHDC, program staff began to review their backlog of requests. Requests for repairs are reviewed by the NeighborLink's Director of Operations, Jonathan Groves. In order to vet the projects, Mr. Groves speaks with prospective clients and will sometimes conduct an on-site visit to determine the extent of the repair needed. Qualifying projects that fall within the scope of services provided by NeighborLink are then assigned to a volunteer or a trade partner.

Once in-home repairs could begin, efforts were made to identify and hire trade partners with relevant experience and availability. Staff members saw an increase in the number of accessibility projects that were requested in 2021, which include installation or repairs to locks, doors, and broken windows. These projects often require a trade partner with experience in these areas.

Trades Partners

The majority of trades partners were initiated through connections with handy volunteers and partners who had already worked with NeighborLink in prior years. These partners included:

- A professional plumbing company that had done a few projects in the past for NeighborLink but were able to provide far more significant services for homeowners with the IHDC funds. This company already had a heart for senior homeowners and were very familiar with the challenges of older homes.
- A roofing contractor that initially volunteered with NeighborLink for small repairs but was able to provide a discount to his services and far more repairs with the IHDC grant.
- The NeighborLink contract handyman has been with the organization nearly as long as they have been operating. The handyman came on-board through a handy volunteer who knew he needed flexible work. This particular contractor has become very efficient in installing handrails, which are commonly requested by NeighborLink's clientele.
- The handywoman/apprentice electrician is serving the very community she grew up in and is working to become a master electrician then encouraging other minorities and women to learn a trade.
- When more complex electrical repairs are needed, NeighborLink contracts with an experienced electrical contractor. The current contractor was referred by a staff member who had worked in construction prior to joining NeighborLink.

NeighborLink makes it a priority to find handy professionals and tradespeople from the neighborhoods they serve whether they are from there or are recommendations from the Community Development Corporations. Trades partners do not commit to a certain number of projects, but most are able to provide discounted services to the organization.



Outcome Measurement Plan

The Outcome Measurement Plan for NeighborLink outlines the data collection strategies and timeline to assess the specified outcome below as part of the IHCD COVID-19 Impact Grant.

COVID-19 Impact Grant - Family Level Outcome

COVID-19 impacted individuals/families who enter and remain in safe and affordable housing for 180 days or more.

Anticipated Number of Participants Served: 66

1. Participant Inclusion Criteria

Indicator	Data Management	Data Collection Details	Contact
COVID-19 Impacted	Salesforce	<ul style="list-style-type: none"> Identify those homeowners who were unable to receive services due to COVID-19 safety precautions. Track how homeowners have been impacted by COVID-19; if not available for each homeowner, provide qualitative data. 	Hailey
Income Level	Salesforce	<ul style="list-style-type: none"> Track income level at intake; verify with financial documents when/if available. 	Hailey

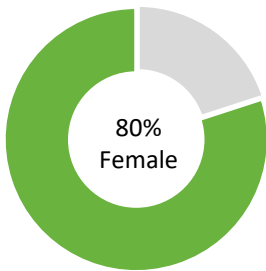
2. Outcome Indicators for 'Enter and Remain in Safe and Affordable Housing'

Indicator	Data Management	Data Collection Details	Contact
Length of Residence	Salesforce	<ul style="list-style-type: none"> Track length of residence at intake. Track current residential status during follow-up calls. 	Hailey
Safe and Affordable Housing	Salesforce	<ul style="list-style-type: none"> Track mortgage status at intake. Track date project completed. Track health or safety violations as available. 	Hailey

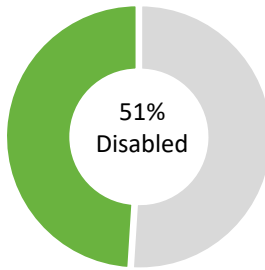
Results: Homeowner Characteristics

- NeighborLink served 108 homeowners with support from IHCD COVID-19 Impact Grant.
- Homeowners are residents of Marion County and meet the requirements outlined by NeighborLink to receive free home repairs, which includes falling below 150% the Federal Poverty Line and owning their home.
- Though limited data were available to verify income, information related to whether homeowners had home insurance was used to verify home ownership.
- Most homeowners were female and African American, and with over half of participants were also disabled.
- The average age of homeowners was 69.
- Over 60% of homeowners lived alone and on average, homeowners had lived in their house for 26 years.

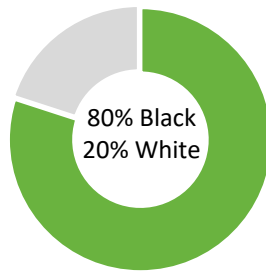
Gender



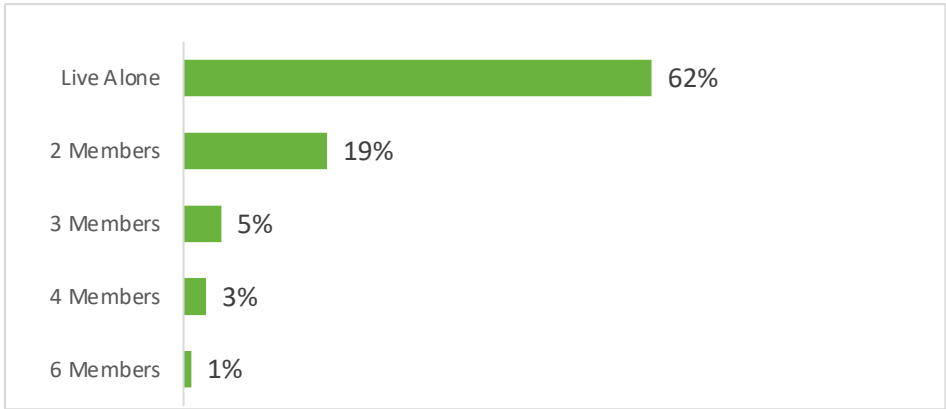
Disability



Race



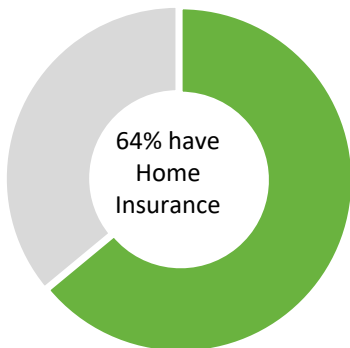
Number of Household Members



Average Number of Years in Home

26 Years

Home Insurance



Impacts of COVID-19

As homeowners requested projects or received follow-up phone calls about recent projects, they were asked how they had been impacted by COVID-19. A summary of the responses is provided below.

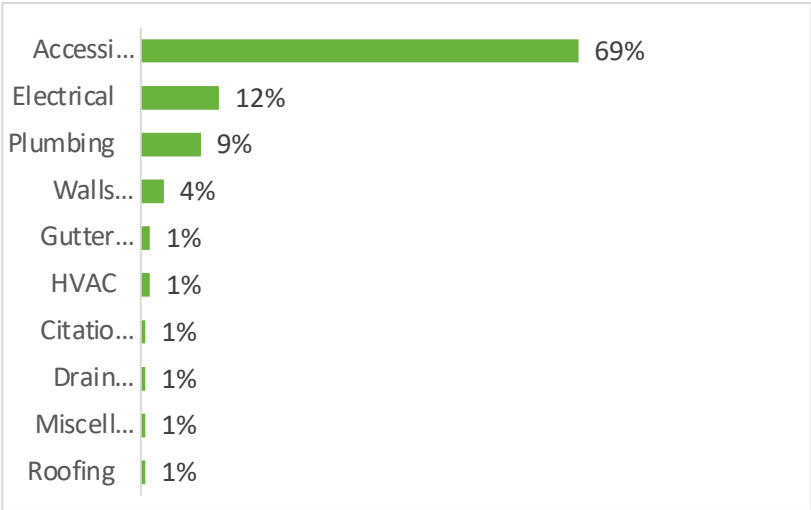
- Personally infected with COVID-19
- Family members infected with COVID-19
- Fear of contracting virus from public places
- Rarely leaving home
- Family members passed away from COVID-19
- Inability to receive visits from family members

Results: Home Repair Projects Completed

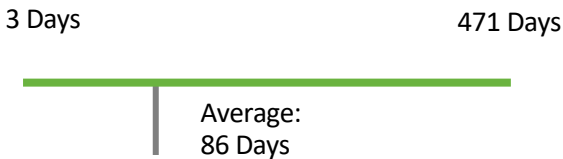
Data were analyzed from 138 projects completed with support from the IHCD Impact Grant. Eighty-one residents had one project completed, 24 residents had 2 projects completed, and 3 residents had 3 projects completed. The average cost of each project was \$310, and projects were completed 86 days on average after requested.

Types of Projects Completed

Most of projects completed aimed to increase accessibility, which includes safety repairs to the interior and exterior of the home.



Length of Time between Project Requested and Completed



Average Project Cost	Trade Partners
\$310	3 Kings Plumbing, Bright Light Electric, Comfort Pro Heating and Cooling, Gerry Burns Labor, King and County Elite Roofing, Montaneke Mitchell, Sweets Heating and Cooling, Tom Hawkins

Common Accessibility Projects

- New doors or door repairs
- New windows or window repairs
- Repair stairs (outside & inside)
- Add handrails (stairs, bathroom)

Feedback from Homeowners

As homeowners received follow-up phone calls about recent projects, they were asked to provide feedback on the projects that had been completed. A summary of the responses is provided below.

- Satisfaction with the work
- Helpful in reducing injuries/falls
- Satisfaction with the trades partner who completed the work
- Requested new projects or identified new problems
- Living safely in home

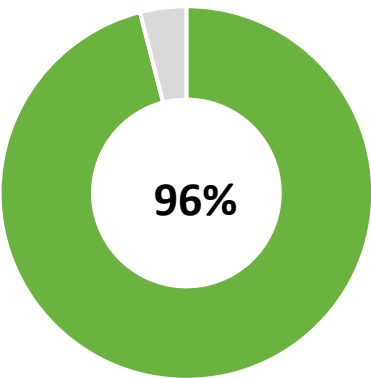
Outcome Results

NeighborLink collected follow-up data to determine if homeowners were still in their homes if they reported that their house was safe to measure the following outcome:

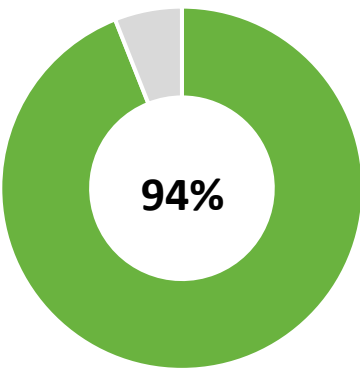
COVID-19 impacted individuals/families who enter and remain in safe and affordable housing for 180 days or more.

Data were collected through follow-up phone calls conducted by staff and practicum students. At follow-up, 96% of homeowners were still living in their homes and 94% reported that their home was safe. Due to the limited ability of staff to conduct follow-up phone calls at regular intervals, follow-up occurred, on average, 179 days after project completion. When homeowners were not available via home, staff verified residency by reviewing public records to determine if the property had transferred owners or if the homeowner was deceased. In addition, home safety data were collected only through follow-up calls and therefore were only available for those who were spoken to on the phone.

Living in Home at Follow-Up (n=108)



Reported Home is Safe at Follow-Up (n=49)

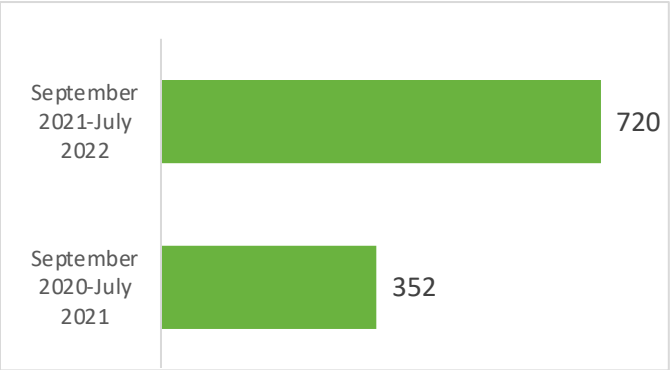


Time Between Project Completion and Follow-Up

Range: 101-287
Average: 179

COVID-19 Impact Grant Value Added

During the COVID-19 Impact Grant period, NeighborLink completed a total of 720 projects, which represented just over a 100% increase compared to the same months of the previous year. Although not all projects included in the chart on the right were supported with COVID-19 Impact Grant dollars, this funding certainly increased the overall capacity of NeighborLink to serve the community.



Conclusions & Recommendations

Follow-up phone calls and property transfer records verified that 96% of the 108 homeowners served by NeighborLink with COVID-19 Impact Grant funds were still living in their homes and 94% reported their home was safe. On average, follow-up was conducted with homeowners 179 days following the completion of their project, which meant that 180 days had not passed for all homeowners included in the data set. Taken together, these data suggests that NeighborLink provides services to older homeowners that supports them to “age in place”. In addition, this is the first time, NieighborLink has provided empirical evidence of the longer-term impact of their services. As NeighborLink moves ahead, the following recommendations are offered in support of program implementation and program evaluation:

Program Implementation:

1. Enhance Sustainability by Funding Both Program Models

NeighborLink staff and board members should continue to identify other sources of funding that will allow them to pay trades partners to assist with a broad array of high-skills projects and manage a brisk pace of completion. This project has demonstrated that an increased number of projects can be completed efficiently (while keeping costs before market rates) and quickly.

2. Increase the Volunteer Base and Revenue Streams with Partner Organizations

NeighborLink has seen the value of working with existing groups of volunteers, some of whom come from businesses, churches, and community-based organizations. Specifically, businesses often bring financial resources to the table through sponsorship. In this way, the engagement of businesses creates opportunities for a greater volume of volunteer labor, but also supports their ability to cover some of NeighborLink’s operations costs incurred throughout the coordination process.

Program Evaluation:

1. Create a More Structured Process for Conducting Follow-up Calls With Homeowners

As NeighborLink gains more experience with their process for conducting follow-up phone calls, it’s possible they could engage their volunteer corps to conduct these calls on a more consistent basis. This will require a system for identifying which homeowners should be contacts and when, and a system for training volunteers to make these calls and record the data.

2. Explore Using the Features of the SafesForce Database to Manage Data Collected through Follow-Up Calls

NeighborLink staff should explore the features of their SalesForce database to see if they would be able to build-out a form or application that would allow for easy entry of data collected through the follow-up calls. Is there a way to give one or two highly-trained volunteers access to the database in order to allow them to support data queries and/or data entry?

3. Standardize the Script for Follow-Up Calls to Ensure Volunteers Collect Consistent Data

Should NeighborLink decide to use volunteer support to conduct follow-up calls, a highly standardized script and data recording protocol will need to be developed. Ongoing training and feedback should be included as well.

**eliminating racism
empowering women**

ywca

Northeast Indiana

- Project Implementation
- Outcome Measurement Plan
- Data Analysis Results
- Organization Recommendations



Program Description

The Hope & Harriet program is an intensive, residential treatment program in a sub-acute medical facility tailored to treat adult women living with substance use disorder. Residents receive a high level of support and structured wrap-around services to meet their individual needs. Hope & Harriet is a contracted service provider with the Indiana Department of Child Services and is an approved Recovery Works provider.

YWCA of Northeast Indiana (YWCA NEIN) began providing addiction recovery services for women through a merger with the Hope House program in 2015. Three years later in 2018, YWCA NEIN absorbed another addiction recovery program from the former Women's Bureau called Transitions. Transitions and Hope House were combined into the Hope & Harriet program. Both programs had more than 30 years of history helping women to rebuild their identities and reunify with their families.

In order to be eligible for the Hope & Harriet program, potential residents must be female, at least 18 years old, and have an identifiable drug and/or alcohol dependency. Residents must be willing to explore learning how to "live in recovery." Priority bed placement is offered to clients who are pregnant, IV drug users, homeless, and/or have rights to their dependent children. When women are referred by the Department of Child Services, family living options are available.

Hope & Harriet residents work through a tiered recovery program with the goal of achieving self-sufficiency and reunifying with their children, family and friends. Upon arrival, clients are assigned a case manager and a counselor who work with them to create an action plan and set goals. As residents complete the identified curriculum and meet criteria included in their action plan, they advance through program levels until they achieve successful graduation.



COVID-19 Impact Grant Implementation

2020-2022 Program Implementation

In spring 2020, there was a reduced number of court-ordered referrals to Hope & Harriet due to health and safety concerns of group-living settings during the COVID-19 pandemic. This resulted in an overall reduction of residents in the program and allowed YWCA NEIN to consolidate Hope & Harriet participants into a single building that also included women receiving domestic violence services. This consolidation was timely, as YWCA NEIN was struggling to hire adequate numbers of staff to support two residential facilities.

Hope & Harriet also experienced a fair amount of staff turnover in 2020 and 2021, including the arrival of a new Assistant Director of Recovery Services and a full-time therapist. Remaining staff members were able to ensure continuity of care for residents by taking on additional responsibilities, and YWCA NEIN was able to contract additional services to a local mental health provider. However, these options were temporary solutions.

A long-term solution to their staffing challenges took shape in late-2021 and was further developed in 2022. YWCA NEIN leadership developed and implemented a plan to “cross-train” their staff to work with both addiction recovery and domestic violence treatment residents. In doing so, they were able to maintain necessary staff levels across both types of residential services.

At the beginning of July 2022, there were 10 adult residents and 2 children residing in the Hope & Harriet program. These numbers represents approximately one-quarter of their 38-bed capacity. At the time of this census, there were several recent successful discharges that contributed to the reduced resident numbers.



COVID-19 Impact Grant Implementation

During much of 2021 and the first half of 2022, YWCA NEIN staff report the number of referrals to Hope & Harriet is still lower than it was prior to spring 2020 when COVID-19 first necessitated safety precautions. In order to increase participation numbers, YWCA NEIN has been actively connecting with their referral partners to remind them of their capacity and their availability to provide residential treatment services.

Although YWCA NEIN is working to increase their census numbers for Hope & Harriet, they are continuing to navigate staffing challenges. Currently, they are seeking to hire 5-8 additional direct-care staff members, which will enable them to effectively meet the needs of an increasing number of residents. YWCA NEIN acknowledges that direct-care staff positions are challenging to fill due to the 24-hour staffing needs of the facility. They are looking for ways to ensure these jobs can provide work-life balance for their employees and they are hopeful that prospective employees feel like COVID-19 risks are continuing to subside.

Impact of COVID-19 on Residents & Programming

Although the most drastic COVID-19 safety precautions were implemented in 2020, COVID-19 was still impacting Hope & Harriet residents before their arrival to the program, and it continued to limit opportunities for recovery support while residents were in treatment. Hope & Harriet staff reported that residents who joined the treatment program in 2021 and 2022 had often experienced more depression and substance use as a result of isolation, financial stress, and lack of employment opportunities associated with COVID-19. Once residents were living in Hope & Harriet, these same barriers still posed challenges for their treatment. For example, many therapy sessions and group activities (e.g., 12-step meetings) were moved to online formats, which made it harder to form or maintain meaningful connections and support systems. COVID-19 safety policies also restricted residents' ability to leave and come back to the facility, so it made it difficult for clients to access external support systems such as family or friends. This often led to increased feelings of isolation and exacerbated mental health challenges for the residents.

By the second quarter of 2022, the residential treatment experience at Hope & Harriet began to include more in-person experiences and there were increased opportunities for residents to build and maintain needed support systems for recovery. Because some residents were reluctant to give up the convenience of online 12-step meetings, the program limited the number of online 12-step meetings residents could attend each week to two. Additional meetings were required to be in-person. In addition, Hope & Harriet residents started holding their own 12-step meetings in the facility. These meetings are completely organized and facilitated by residents for residents. Increasingly, residents attending therapy sessions with outside providers are doing so in-person rather than online. Court appearances are now also required to be in-person. Despite the transportation challenges that court appearance and therapy sessions can pose for some residents, the reintegration of social systems and supports is often a critical component of the recovery process.

Outcome Measurement Plan

The Outcome Measurement Plan for YWCA Northeast Indiana outlines the data collection strategies and timeline to assess the specified outcome below as part of the Indiana Housing and Community Development Authority Impact Grant.

COVID-19 Impact Grant - Family-Level Outcome

COVID-19 impacted individuals/family who enter or maintain mental health services, and report improved mental health as a result of those services.

Anticipated Number of Participants Served: 120

1. Participant Inclusion Criteria

Indicator	Data Collection Tools	Data Management	YWCA Contact
COVID-19 impacted individuals	Staff Survey (for staff who were employed pre-COVID)	Assess mental health, living situations, and behavior differences among patients since COVID-19	Breanna Jackson
Enter/maintained mental health services	ClientTrack	Record admission and discharge dates. Outcome data will be collected for clients who have obtained services for at least 60 days.	Breanna Jackson
Income Level	ClientTrack	Employment Status at Intake and Discharge	Breanna Jackson

2. Outcome Indicators for "Improved Mental Health"

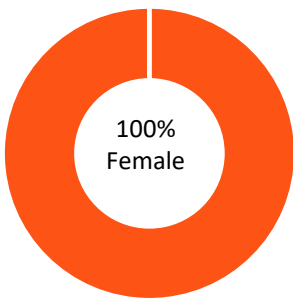
Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices.

Indicator	Data Collection Tools	Data Management	YWCA Contact
Remain abstinent for 60 and 180 days	Forensic Fluids Report	<ul style="list-style-type: none"> Track drug tests at intake, 60 days, and 180 days. 	Breanna Jackson
Decrease in Severity of Anxiety & Depression Symptoms	GAD-7 & PHQ-9	<ul style="list-style-type: none"> Track scores on the GAD-7 & PHQ-9 at intake, 60 days, and 180 days. 	Specialty Services Counselor
Improved Hopefulness for the Future	Wellbeing Survey	<ul style="list-style-type: none"> Track scores on the Hopefulness Survey at intake, 60 days, and 180 days. 	Intake & Outreach Coordinator

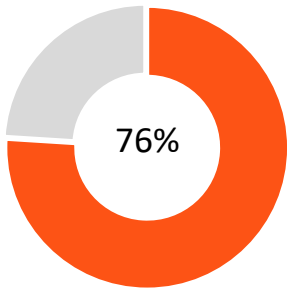
Results: Participant Characteristics

- Data were analyzed for 85 participants who resided at Hope & Harriet for at least 60 days. However, because 32 participants received treatment for less than 60 days, which was the threshold determined by YWCA NEIN for successful program completion, the final data set for outcome measurement included 53 participants.
- All clients served by the grant were referred either by criminal justice entities (Recovery Works) (49%) or the Department of Child Services (51%).
- All clients were female, 87% were white and the average age was 31; 76% percent of clients reported they had children under the age of 18; 19% had children living with them at Hope & Harriet.

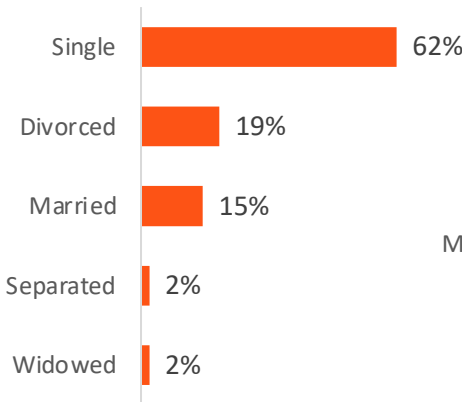
Gender



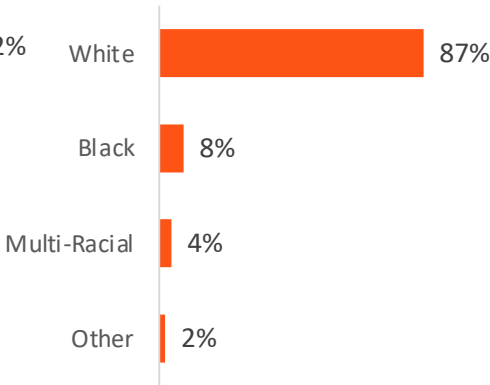
Clients with Children under the age of 18



Family Status



Race



Treatment Services

Clients receive a variety of treatment services during their stay at Hope & Harriet.

- Related to mental health, 83% of clients attended therapy during the program.
- Clients who stay with the program for at least 60 days tend to have better success.
- For participants included in the outcome analyses for the COVID-19 Impact Grant, the minimum length of stay was 61 days and maximum length of stay was 563 days, with an average length of stay of 161 days.

Outcome Results

YWCA of Northwest Indiana gathered data during the COVID-19 Impact Grant to measure the following outcome:

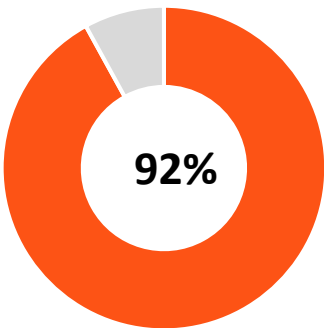
COVID-19 impacted individuals/family who enter or maintain mental health services, and report improved mental health as a result of those services.

The program served 66 clients during the grant, which was just over half of the anticipated number of 120 clients. Drug screens and mental health screening tools were utilized to assess the extent to which participants demonstrated “improved mental health”.

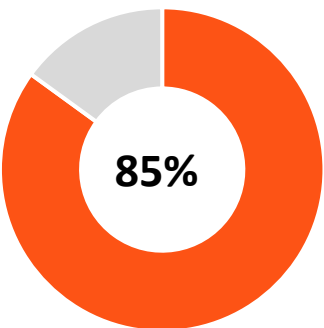
Drug Screening Results

Drug screens occur at intake and every 30 days when clients are residing at Hope & Harriet. Residents are also screened upon discharge from the program. The data below represent drug screen results at 60 days and 180 days (or at discharge, if prior to 180 days).

Clean Drug Screen at 60 Days (n=51)



Clean Drug Screen at 180 Days (n=39)



Mental Health Screening Tools - Results

YWCA staff use a variety of mental health screening tools as they treat clients. These tools have been historically used to screen clients for mental health issues at in-take. For the purposes of this project, these tools were also used to assess indicators of mental health at 60 days.

Wellbeing Survey (n=17)

The Wellbeing survey measures 4 indicators of hopefulness. Data were available from 17 clients.

88% showed increased hopefulness or continued to report high levels

General Anxiety Disorder (GAD) – 7 (n=11)

The GAD-7 is a widely-used tool that helps diagnose anxiety disorders. Data were available from 11 clients.

64% showed improvements in anxiety

Patient Health Questionnaire (PHQ) – 9 (n=11)

The PHQ-9 is a widely-used tool that quickly helps identify depression severity. Data were available from 11 clients.

55% showed improvements in depressive symptoms

Conclusions & Recommendations

Follow-up data collected at discharge or 60-days post-intake show that 92% of women who initiate and maintain treatment for at least 60-days abstain from substance use during their residency. Although there are limited data available related to mental health indicators, there is evidence that the majority of Hope & Harriet residents also reported reduced symptoms of depression and anxiety, and increased hopefulness. It should be noted that these data were only available for fewer than one-third of residents who remained in treatment for 60 days. As such, these results should be considered preliminary. As YWCA of NEIN moves ahead, the following recommendations are offered in support of program implementation and program evaluation:

Program Implementation:

1. **Continue to conduct outreach to increase awareness of services offered.**

Statewide and national data suggest that substance abuse and mental health needs remain high following the COVID-19 pandemic. However, despite the need, referrals from DCS and Recovery Works remain lower than pre-pandemic levels. Because nearly all women served by Hope & Harriet are referred from these two agencies, both of which may have experienced staff turnover during the past two years, YWCA staff may need to ensure they are aware of the services offered and evidence of success.

2. **Create opportunities for longer-term engagement with clients.**

During the latter stages of the pandemic, when it was safe for residents to gather in groups, Hope & Harriet participants organized and offered their own 12-step meetings facilitated in the facility. If possible, these meetings could continue to be offered to women after they are discharged from the program. This could allow Hope & Harriet staff to follow-up with residents after discharge formally or informally. ***PROGRAM UPDATE: 12-step meetings are now available to Hope & Harriet alumnae, and YWCA NEIN has reinstituted outpatient case management services to provide longer-term support for clients after they leave the program.***

Program Evaluation:

1. **Implement a standardized process for gathering follow-up data on mental health symptoms.**

Program staff gather very consistent information from residents at intake, including data used for clinical purposes related to mental health symptoms. Because these data can also be leveraged to demonstrate program outcomes, more attention should be paid to collecting them at regular intervals during the treatment process and at discharge.

2. **Increase access to data systems (e.g., ClientTrack, Theraquest) among clinical and case management staff.**

In order to aggregate data for the present project, the Assistant Director of Recovery Services was required to gather data from multiple sources and create a master spreadsheet. It was noted that some of these data could have been managed in one of the two existing data management systems already used by staff.

3. **Consider using a validated measure of hopefulness.**

The current instrument used to assess levels of hopefulness among residents at intake appears to have evolved from items from other measures or questions developed in-house. However, there are alternative self-report instruments, some of which appear easy to administer, which may help assess more meaningful changes in this outcome.

COVID-19 Impact Grantee Feedback

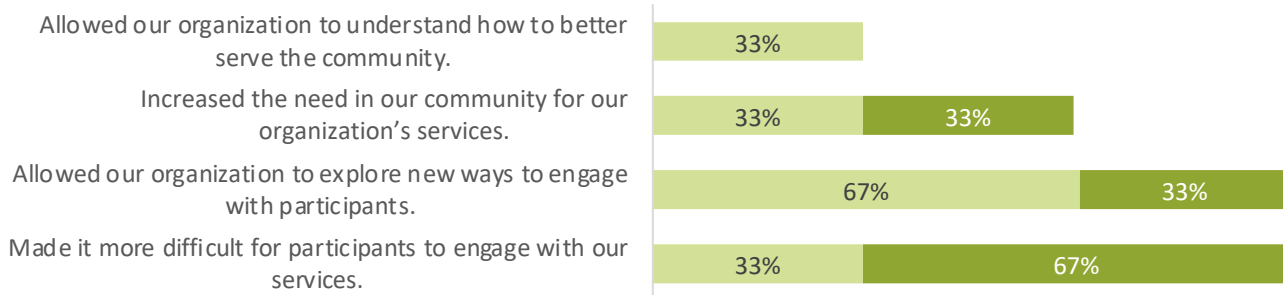
In September 2022, COVID-19 Impact Grantees provided some reflections on the project by completing an online survey administered by Limelight Analytics. Grantees were asked questions about the ways in which the COVID-19 pandemic affected their organization and their ability to provide programming. In addition, grantees also provided feedback on the collaborative evaluation work with their assigned IHEDA Impact Grant evaluator. Responses from the three grantees that worked with Limelight Analytics are summarized below.

Impact of the COVID-19 Pandemic

Because of the COVID-19 pandemic, organizations reported an increased need of services and explored new ways to engage with participants. All grantees agreed that the COVID-19 pandemic made it more difficult for participants to engage with services. However, 67% of organizations reported that the pandemic increased the need for services and 100% reported that their organization explored new ways to engage with participants because of the pandemic.

■ Somewhat Agree ■ Strongly Agree

The COVID-19 Pandemic...

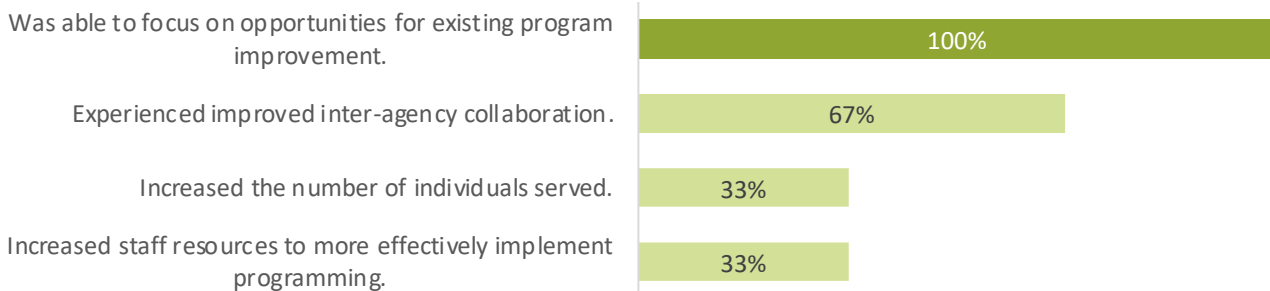


Impact of COVID-19 Impact Grant Funds

COVID-19 Impact Grant funds helped organizations focus on opportunities to improve existing programs. All grantees reported that COVID-19 Impact Grant funds helped them focus on improving existing programs rather than developing new programs. One organization reported that they were able to increase staff resources and two organizations experienced improved inter-agency collaboration. One organization reported an increase in the number of individual served because of COVID-19 Impact Grant funds.

■ Somewhat Agree ■ Strongly Agree

Our organization...



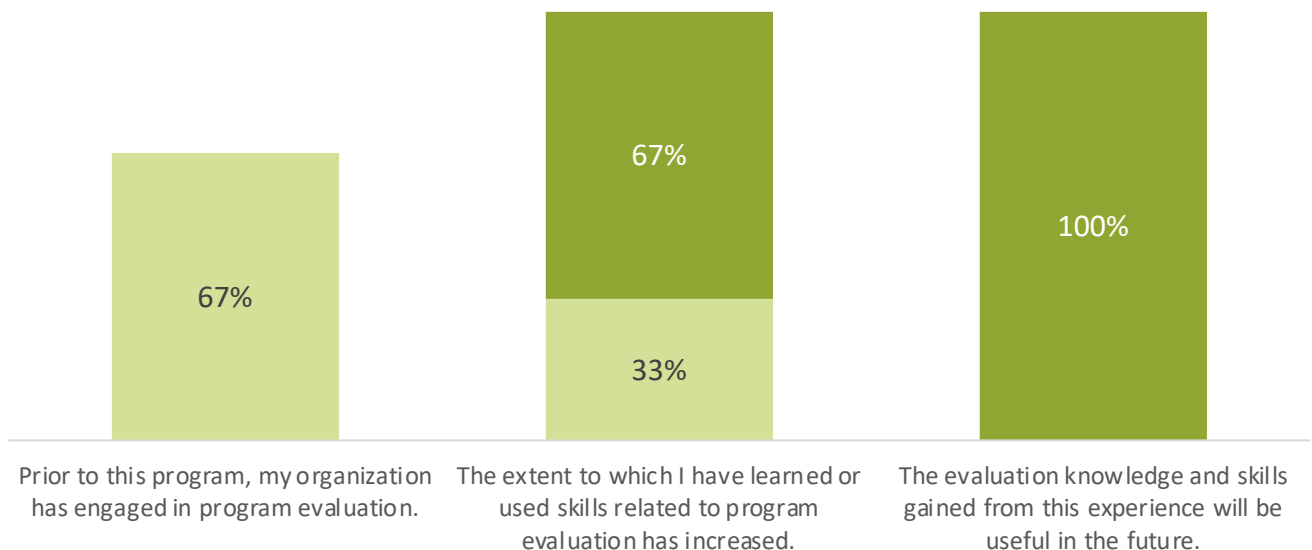
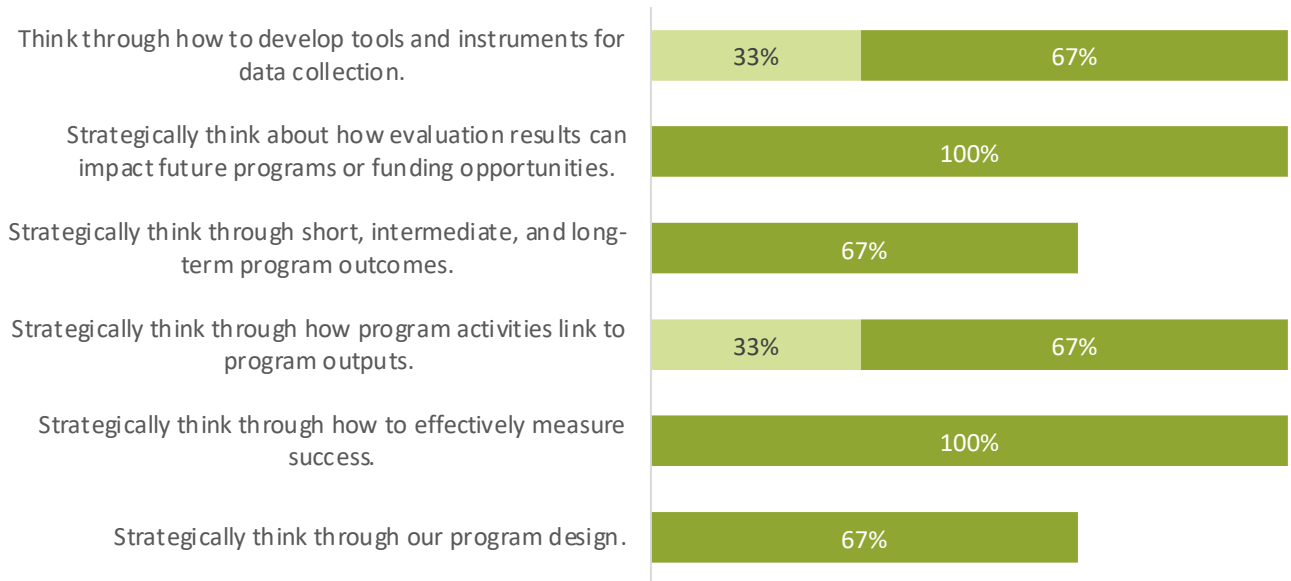
COVID-19 Impact Grantee Feedback

Evaluation Activities

Participating in evaluation technical support helped organizations think strategically about outcomes and gain skills and knowledge related to data collection and evaluation. All grantees agreed that their COVID-19 Impact Grant evaluator helped them measure success and learn about program outputs and outcomes. Additionally, 100% of grantees reported that their evaluation skills had increased, and that the knowledge gained from this experience will be useful in the future.

■ Somewhat Agree ■ Strongly Agree

Our IHCD Impact Grant evaluator helped us....



Summary and Conclusions

Synthesis of Results Across COVID-19 Impact Grantees

Outcome data collected by the three organizations that received evaluation support from Limelight Analytics suggest that they are beginning to benefit the COVID 19-impacted individuals and families they served during the grant period. However, none of the organizations were successfully able to collect 180-day follow-up data from the majority of the clients/participants they served during the grant. There are several reasons for this:

1. Two of the organizations continued to struggle with program enrollment at the beginning of the grant period. Although participation began to pick-up later in the grant term, there was only a limited amount of time remaining until the grant ended, and follow-up often needed to occur well before the 180-day period had lapsed in order to be included in analyses.
2. All three organizations needed to initiate new follow-up data collection strategies or sustain their current follow-up procedures when they were experiencing staff turnover. This impacted some of the organizations more than others, but follow-up data collection rates (over any length of time) ranged from 8% (30-day employment retention data collected by Fathers and Families Center) to 96% (60-day drug screens collected by YWCA NE).
3. Organizations underestimated the amount of time (and labor) it would take to systematically collect comprehensive follow-up data from program participants. For two of the organizations, by the time it was evident that their data collection systems and protocols were inadequate, it was too late to change course.

Despite these challenges, all three organizations have developed a greater understanding of the the resources, protocols and time that is needed to collect robust outcome data. Should these organizations sustain their current data collection systems and devote staff time and energy to gathering these data, they all should be able to draw some more significant conclusions about the impact of their services and support over a six-month timeframe.

Sustaining and Strengthening Outcome Measurement Efforts

In order to sustain their outcome measurement efforts, all of the organizations will need to dedicate staff time and energy to reviewing their current data collection and management strategies and/or the tools they use for data collection. While participation in this project has certainly raised awareness of the capacity-building efforts needed, organizations will be served well by collaborating with others in their organization to ensure resources and time are dedicated to the following areas indicated for each organization in the table below.

Areas of Evaluation Capacity to Strengthen	Fathers and Families Center	NeighborLink Indianapolis	YWCA Northeast Indiana
Revise current indicators to strengthen outcome measurement.			✓
Systematically gather and record key indicators of success.	✓	✓	✓
Review and revise current outreach strategies to create efficiencies	✓	✓	
Review and revise data management practices to flag missing data.	✓		

Summary and Conclusions

Observations/Recommendations for IHCD

Upon applying for the COVID-19 Impact Grant, none of the applicants had been measuring outcomes that required a 6-month follow-up with program participants. However, all agreed to do so as a term of their funding. Although working with an evaluation consultant provided support for these organizations around evaluation planning and data collection methodology, grantee organizations were ultimately responsible for dedicating the staff resources and implementing the data collection plan. Even though all grantee organizations were able to collect some amount of outcome data, only one of the three was able to collect enough data from which conclusions could be drawn. Even so, the data from this organization do not represent outcomes with at least a 6-months follow-up period.

All grantee organizations that worked with Limelight Analytics have sophisticated data management systems to track clients, services delivered, and even outcomes. However, the collection of 6-month outcome data cannot be facilitated without additional staff effort. In addition, the collection of reliable and valid data requires systems and protocols to ensure the data are collected and recorded with consistency. This is often a challenge for non-profit organizations without dedicated internal evaluators. It's especially challenging for non-profit organizations experiencing staff shortages.

Finally, it appears that these organizations' relative inexperience collecting 6-month follow-up data is at least partially due to the fact they have never been required to do so. Their other funding sources either do not require outcome measurement, or the required outcomes are shorter term. As such, the requirement for 180-day follow-up was a new endeavor for these organizations. Nonetheless, grantee organizations reported gains in evaluation capacity, and they self-report they are more prepared to measure outcomes moving forward. After reflecting on the 10 months of collaborative work with the three grantee organizations, and analyzing the data these organizations were able to collect, Limelight Analytics offers the following recommendations to IHCD should they choose a similar evaluation approach in the future:

- There was minimal focus on evaluation sustainability as a grant requirement. Although organizations received technical support on data collection and outcome measurement, there was no emphasis on putting an evaluation structure in place to continue efforts beyond the grant period. While there is likely some sustainable increases in evaluation capacity, it's unclear how permanent these capacity increases are. For this reason, it may prove useful in the future to consider ways to encourage sustained capacity-building with future outcome-focused funding streams.
- If IHCD uses prescribed outcome measures for future grant competitions, it may be useful to define shorter follow-up periods (e.g., 60 or 90 days). Because several of the outcome options included in the grant application involved longer-term outcomes, of which the follow-up period spanned half of the grant term (6 months), there were not likely sufficient opportunities to collect and present complete data.
- Even with sustained increases in evaluation capacity, it is unlikely that sophisticated data analysis capacity exists within any of these three organizations. Because data analysis for this project often required the merging of files from different sources, filtering of data, and summarizing services and multiple data points per client, it will likely prove useful to continue to provide external evaluation expertise for outcome measurement for defined groups of program participants.